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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Patent Number	7,074,909
	Issue Date	July 11, 2006
	First Named Inventor	Kingsman et al.
	Title	Antibodies
	Art Unit	N/A
	Examiner Name	N/A
Attorney Docket No.		31127/43657

I hereby revoke all previous powers of attorney given in the above-identified application.

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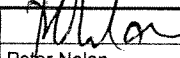
Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	15 April 2008
Name	Peter Nolan	Telephone	44 (0) 1865 783000
Title and Company	Senior Vice President of Commercial Development, Oxford BioMedica (UK) Ltd.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 2 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: April 15, 2008Signature:  (David A. Gass)